

# UC BERKELEY MANUAL MONTHLY TIMESHEET

EMPLOYEE NAME: \_\_\_\_\_ UCB ID: \_\_\_\_\_  
 TITLE: \_\_\_\_\_ DEPT: \_\_\_\_\_

DAY OF THE MONTH	HOLIDAY	VACATION LEAVE USED	SICK LEAVE USED	OTHER	LEAVE W/O PAY	NOTES
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
<b>TOTAL</b>	0	0	0	0	0	

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Supervisor, please submit by the 5th business day of the month completed and SIGNED timesheets in ONE of the following ways*

*1) If your department receives HR support from CSS, please scan/email to [csstimesheets@berkeley.edu](mailto:csstimesheets@berkeley.edu) (please indicate Dept/Research Unit in subject line) OR fax : (510) 664-9300*

*2) If your department is not yet receiving HR support from CSS, please send this timesheet to your timekeeper. If you're not sure who your department's timekeeper is, a link to a list can be found here: <http://caltime.berkeley.edu/timekeepers>*